

# KENTUCKY LAW ENFORCEMENT COUNCIL

*Peace Officer Professional Standards  
Telecommunicator Professional Standards*

## PRE-EMPLOYMENT Polygraph Questionnaire



FORM I-2

***This questionnaire should be completed PRIOR to arriving at the test site. Please give this form to the examiner on the day of testing.***

***Call the KLEC office at 859-622-6218 on the day of your appointment if you are running late or are lost.***

**APPLICANT NAME:** \_\_\_\_\_

Agency applying with: \_\_\_\_\_

Position applying for: \_\_\_\_\_

## **INSTRUCTIONS TO JOB APPLICANT**

Before completing the following questionnaire, it is important for you to understand the purpose of the polygraph examination you will be taking. Law enforcement officials are expected to have a high degree of honesty and integrity. If law enforcement agencies only hired people who had never made a mistake, done anything wrong, nor ever committed a crime, there would be no one in law enforcement positions. There are no perfect people.

The purpose of this questionnaire and the forthcoming polygraph examination is not to find the perfect person. This questionnaire and the polygraph examination have been designed to assist in identifying the honest person. Agencies seek people they can trust.

No law enforcement agency should hire someone that cannot be trusted. Your word is your bond. The law enforcement community, the court systems, and society as a whole must be able to trust their law enforcement officials. As you fill out this questionnaire, above all – be honest.

- While completing the questionnaire, answer all questions to the best of your ability. It is understood that no one can remember every detail or every exact date, but again, aim to answer to the best of your ability.
- If you do not understand a question, do not answer it. Put an asterisk (\*) by the question number. The polygraph examiner will explain the question.
- The polygraph examiner will explain the process in detail. If you have questions, you will be given an opportunity to address those with your examiner. It is important that you discuss any concerns or questions prior to the polygraph examination.
- Do not lie in this questionnaire. Do not lie in the polygraph examination procedure.
- Lying is an intentional act. Do not intentionally leave out information. Do not intentionally misrepresent information.

Write in black or blue ink. Make comments as needed and write on the backside of these pages when necessary.

## PERSONAL INFORMATION:

Full Legal Name: \_\_\_\_\_  
(First) (Middle) (Last)

Soc. Security #: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

Place of Birth: \_\_\_\_\_  
(City/State/County)

Current Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

How long living at current address?: \_\_\_\_\_

Home phone number: (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

List all other states and/or countries in which you have lived: \_\_\_\_\_

Have you ever used a different name? Yes No

Have you ever used a different social security number? Yes No

Have you ever used a different date of birth? Yes No

Are you a U.S. citizen? Yes No

If yes, please check one: ☐ U.S. born  
☐ U.S. naturalized  
☐ Other: \_\_\_\_\_

Marital Status: ☐ Single  
☐ Married  
☐ Divorced  
☐ Separated  
☐ Other: \_\_\_\_\_

Have you ever taken a polygraph or other type of honesty test? Yes No

If "yes": 1.) \_\_\_\_\_  
(Year) (Agency) (Purpose or Reason)

2.) \_\_\_\_\_  
(Year) (Agency) (Purpose or Reason)

## EDUCATION:

High School Graduate?	Yes	No	Name of school: _____ Year Graduated: _____
4-Year College Degree?	Yes	No	Name of school: _____ Field of study: _____ Year Graduated: _____
2-Year College Degree?	Yes	No	Name of school: _____ Field of study: _____ Year Graduated: _____
Graduate Degree?	Yes	No	Name of school: _____ Field of study: _____ Year Graduated: _____

Other Specialty Training and/or Certifications:

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## EMPLOYMENT HISTORY - MILITARY:

Are you currently or have you ever served in the military? Yes No

*If no, please go to the next section.*

Branch of Service: \_\_\_\_\_ Highest Rank: \_\_\_\_\_

Enlistment Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Anticipated) Discharge Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Type of Discharge: \_\_\_\_\_

Have you ever received any form of disciplinary action (court martial, article 15, demotions, violations of uniform code, etc.) while in the military? Yes No

If yes, please explain: \_\_\_\_\_

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What is the most serious infraction you committed in the military, whether detected or undetected? \_\_\_\_\_

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## EMPLOYMENT HISTORY:

Have you previously submitted an application for employment with this agency?      Yes      No

If yes, list the approximate date(s): \_\_\_\_\_

List all law enforcement agencies you have submitted an application with in the past:

1.) \_\_\_\_\_ Year submitted: \_\_\_\_\_

2.) \_\_\_\_\_ Year submitted: \_\_\_\_\_

3.) \_\_\_\_\_ Year submitted: \_\_\_\_\_

4.) \_\_\_\_\_ Year submitted: \_\_\_\_\_

Current Employer: \_\_\_\_\_ Hire Date: \_\_\_\_\_  
(Month) (Year)

Position/Title: \_\_\_\_\_

Previous Employers: *Start with the most recent. Use reverse side of this sheet if space is not adequate.*

a.) \_\_\_\_\_  
 (Employer)                      Start: (Month) (Year)                      End: (Month) (Year)

b.) \_\_\_\_\_  
 (Employer)                      Start: (Month) (Year)                      End: (Month) (Year)

c.) \_\_\_\_\_  
 (Employer)                      Start: (Month) (Year)                      End: (Month) (Year)

d.) \_\_\_\_\_  
           (Employer)                      Start: (Month) (Year)                      End: (Month) (Year)

e.) \_\_\_\_\_  
 (Employer)                      Start: (Month) (Year)                      End: (Month) (Year)

List any job in which you have been fired, asked to resign or forced to leave:

[illegible][illegible]

c.)		
(Employer)	(Reason)	(Year Terminated)

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- 
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12. How many times in a normal work month are you late? \_\_\_\_\_
13. What is the most valuable thing you ever took from an employer? \_\_\_\_\_

[illegible]

## THEFT OF PROPERTY:

In the previous section you documented all thefts from a place of employment. This section is to include **all other thefts** of property that you have been involved in from other sources **at any time in your life**. This could include, but is not limited to cash, shoplifting, switching price tags, giving /receiving unauthorized discounts, receiving stolen property, etc.

- |   |            |           |
|---|------------|-----------|
| 1. Have you ever taken anything from a purse/wallet?                    | <b>Yes</b> | <b>No</b> |
| 2. Taken anything by force?   | <b>Yes</b> | <b>No</b> |
| 3. Taken a motor vehicle?   | <b>Yes</b> | <b>No</b> |
| 4. Taken something from within or off a motor vehicle?                  | <b>Yes</b> | <b>No</b> |
| 4. Received or distributed any items you knew or suspected were stolen? | <b>Yes</b> | <b>No</b> |
| 5. What is the most valuable item you have ever taken? _____            |            |           |

*In the space provided below, please list **EVERYTHING** you have ever taken which you did not have permission to take. This does **not** include previously mentioned thefts from employers.*

[illegible]

## **CRIMINAL ACTIVITY:**

*Circle the appropriate answer. Explain any 'yes' answers at the end of this section in the explanation area. Be sure to reference your explanation with the corresponding question number.*

- |   |            |           |
|---|------------|-----------|
| 1. Unlawfully cause a person's death / person to be hospitalized?   | <b>Yes</b> | <b>No</b> |
| 2. Falsely report a fire or other emergency situation?  | <b>Yes</b> | <b>No</b> |
| 3. Falsely report a crime?  | <b>Yes</b> | <b>No</b> |
| 4. Use phony or false identification?   | <b>Yes</b> | <b>No</b> |
| 5. Use another person's identity to obtain items?   | <b>Yes</b> | <b>No</b> |
| 6. Use a credit card or ATM card illegally?   | <b>Yes</b> | <b>No</b> |
| 7. Ever issue a check knowing you did not have the funds to cover it?   | <b>Yes</b> | <b>No</b> |
| 8. Commit a "hate crime" (racial, ethnic or religious motive)?  | <b>Yes</b> | <b>No</b> |
| 9. Involved in a physical altercation/fight?  | <b>Yes</b> | <b>No</b> |
| 10. Use of or showing of a weapon during an altercation?  | <b>Yes</b> | <b>No</b> |
| 11. Make a threatening or obscene communication anonymously?  | <b>Yes</b> | <b>No</b> |
| 12. Intentionally damage another's property by any means?   | <b>Yes</b> | <b>No</b> |
| 13. Carry any type of unauthorized weapon?  | <b>Yes</b> | <b>No</b> |
| 14. Manufacture or utilize an explosive or incendiary device?   | <b>Yes</b> | <b>No</b> |
| 15. Make a phony or inflated insurance claim?   | <b>Yes</b> | <b>No</b> |
| 16. Knowingly make a false statement on any official document?  | <b>Yes</b> | <b>No</b> |
| 17. Knowingly make a false statement in a judicial proceeding?  | <b>Yes</b> | <b>No</b> |
| 18. Take something from someone by force?   | <b>Yes</b> | <b>No</b> |
| 19. Use someone else's checks or credit cards without their permission?   | <b>Yes</b> | <b>No</b> |
| 20. Break into a motor vehicle?   | <b>Yes</b> | <b>No</b> |
| 21. Break into a building (home / business / etc)?  | <b>Yes</b> | <b>No</b> |
| 22. Set fire to anything?   | <b>Yes</b> | <b>No</b> |
| 23. Kidnap someone or otherwise keep someone against his or her will?   | <b>Yes</b> | <b>No</b> |
| 24. Have sexual contact with someone without their consent, (using force or when they were impaired or otherwise not mentally competent)? | <b>Yes</b> | <b>No</b> |
| 25. Ever force someone to have sexual relations/contact with you?   | <b>Yes</b> | <b>No</b> |
| 26. Ever have sexual relations/contact with a family member other than your spouse?   | <b>Yes</b> | <b>No</b> |
| 27. Ever have sexual relations/contact with an animal?  | <b>Yes</b> | <b>No</b> |
| 28. Ever sexually aroused by a fire?  | <b>Yes</b> | <b>No</b> |
| 29. Ever paid for sex or been paid for sex?   | <b>Yes</b> | <b>No</b> |



30. Ever possess, sell, produce or distribute any child pornographic material?	<b>Yes</b>	<b>No</b>
31. Ever viewed/downloaded child pornography?	<b>Yes</b>	<b>No</b>
32. Expose yourself in public?	<b>Yes</b>	<b>No</b>
33. Ever physically or sexually abuse a child?	<b>Yes</b>	<b>No</b>
34. Ever been involved in any illegal sexual activity?	<b>Yes</b>	<b>No</b>
35. Counterfeit anything?	<b>Yes</b>	<b>No</b>
36. Commit blackmail / any form of extortion?	<b>Yes</b>	<b>No</b>
37. Forgery?	<b>Yes</b>	<b>No</b>
38. Bribery?	<b>Yes</b>	<b>No</b>
39. Tamper with a witness or evidence?	<b>Yes</b>	<b>No</b>
40. Fail to appear in court?	<b>Yes</b>	<b>No</b>
41. Use a computer to commit a crime?	<b>Yes</b>	<b>No</b>
42. Harass or stalk someone?	<b>Yes</b>	<b>No</b>
43. Deliberately hurt an animal (other than legally hunting/fishing)?	<b>Yes</b>	<b>No</b>
44. Make an illegal bet / Take an illegal bet?	<b>Yes</b>	<b>No</b>
45. Married to more than one person at a time?	<b>Yes</b>	<b>No</b>
46. Impersonate a police officer?	<b>Yes</b>	<b>No</b>
47. Run or evade a police officer?	<b>Yes</b>	<b>No</b>
48. Ever use physical force with your spouse or significant other? (striking, pushing, slapping, shaking, etc)	<b>Yes</b>	<b>No</b>
49. Ever use physical force with a parent? (striking, pushing, slapping, etc)	<b>Yes</b>	<b>No</b>
50. Ever use physical force with your child or anyone else's.	<b>Yes</b>	<b>No</b>
51. Ever been the subject of a restraining order or a protective order?	<b>Yes</b>	<b>No</b>
52. Ever use a weapon against someone?	<b>Yes</b>	<b>No</b>
53. Been involved in a police investigation?	<b>Yes</b>	<b>No</b>
54. Ever been convicted of a criminal offense?	<b>Yes</b>	<b>No</b>
55. Ever had a criminal charge reduced in court?	<b>Yes</b>	<b>No</b>
56. Ever had a criminal charge expunged or sealed?	<b>Yes</b>	<b>No</b>
57. Have the police ever been contacted because of something you did or assisted someone in doing?	<b>Yes</b>	<b>No</b>
58. Ever carried a weapon illegally?	<b>Yes</b>	<b>No</b>
59. Ever been denied a permit to carry a handgun?	<b>Yes</b>	<b>No</b>
60. Ever been involved in organized crime?	<b>Yes</b>	<b>No</b>

61. Ever been involved in any group (meaning volunteered for, associated with, a member, associate member, attended meetings, provided financial or any other type of assistance) that advocated violence, terrorist, subversive activity or racial prejudice? (gang, KKK, militia, etc.)	Yes	No
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What is the most serious criminal act you ever committed, whether detected or undetected? (Use the reverse of this page if more space is needed.) \_\_\_\_\_

**EXPLANATION AREA:**

*In the space provided, explain any 'yes' answer that you have given to the previous questions.*

*Give date of incident and describe circumstances. (Use the back of this page if space is not adequate):*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

## TRAFFIC VIOLATIONS:

*Please explain any 'yes' answers below. Be sure to reference your explanation with the corresponding question number.*

1. Have you ever been refused a driver's license? **Yes** **No**
2. Have you ever altered a license or given false information to obtain a license? **Yes** **No**
3. Have you ever had driver's licenses from more than one state at the same time? **Yes** **No**
4. Have you ever had your license suspended or revoked? **Yes** **No**
5. Did you ever knowingly drive an unregistered motor vehicle? **Yes** **No**
6. Did you ever knowingly drive an uninsured motor vehicle? **Yes** **No**
7. Did you ever damage another's property with a vehicle and not report it? **Yes** **No**
8. Have you ever fled the scene of an accident? **Yes** **No**
9. Do you currently owe any fines for traffic or parking violations? **Yes** **No**
10. Ever had a traffic or parking ticket "fixed"? **Yes** **No**
11. Do you currently owe any fines for traffic or parking violations? **Yes** **No**
12. How many traffic citations have you received since you first received your license? \_\_\_\_\_

**List all traffic citations (tickets) received for moving violations in the past 5 years:**  
*(Use the back of this page if more space is needed)*

VIOLATION	MO. / YR.	STATE	DISPOSITION

\_\_\_\_\_  
State in which you currently possess a driver's license

\_\_\_\_\_  
Driver's license number

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## ILLEGAL DRUGS:

*In the chart below, write the dates of your first and last use for each illegal drug. The dates should be as exact as possible. Remember, lying is an intentional act, not an honest error.*

*When asked to give the maximum number of times used for an illegal drug, you must give the **ABSOLUTE MAXIMUM** number of times. If you are not sure how many times you used an illegal drug, then state the **MAXIMUM** number of times you **COULD** have used.*

*In the “How drug used” column, write if the drug was injected, snorted, smoked, ingested, etc.*

*If you have never used one of the listed illegal drugs, put a checkmark in the “never” column.*

DRUG USED	FIRST TIME USED	LAST TIME USED	MAXIMUM TIMES USED	HOW DRUG USED	NEVER
Marijuana					
Hashish					
PCP					
Angel Dust					
THC					
LSD / Acid					
Peyote					
Mescaline					
Heroin					
Cocaine					
Quaaludes					
Downers					
Tranquilizers					
Amphetamine					
Steroids					
Ecstasy/XTC					
Preludin					
Dilaudid					
Talwin / PBZ					
Speed					
Inhalants					
Meth-amphetamine					
Psilocybin (Mushrooms)					
Others: (Please list type)					
_____					
_____					

- |  |            |           |
|--|------------|-----------|
| 1. Have you used any other illegal substance that has not been mentioned?        | <b>Yes</b> | <b>No</b> |
| 2. Ever used another person's prescription medication for recreational purposes? | <b>Yes</b> | <b>No</b> |
| 3. Ever misuse or abuse your own prescription medication?                        | <b>Yes</b> | <b>No</b> |
| 4. Ever give or sell your own prescription medication?                           | <b>Yes</b> | <b>No</b> |
| 5. Have you ever purchased any illegal drug?                                     | <b>Yes</b> | <b>No</b> |
| 6. Have you ever sold any illegal drug?  | <b>Yes</b> | <b>No</b> |
| 7. Have you ever manufactured, grown, or harvested an illegal drug?              | <b>Yes</b> | <b>No</b> |
| 8. Ever delivered / distributed an illegal drug?                                 | <b>Yes</b> | <b>No</b> |
| 9. Held or stored any illegal drug for someone else?                             | <b>Yes</b> | <b>No</b> |
| 10. Operated a motor vehicle while under the influence of an illegal drug?       | <b>Yes</b> | <b>No</b> |
| 11. Have you been present when anyone:   | <b>Yes</b> | <b>No</b> |
| <input type="checkbox"/> Used illegal drugs                                      |            |           |
| <input type="checkbox"/> Sold illegal drugs                                      |            |           |
| <input type="checkbox"/> Cooked illegal drugs                                    |            |           |
| <input type="checkbox"/> Packaged illegal drugs                                  |            |           |
| <input type="checkbox"/> Transported illegal drugs                               |            |           |

12. When is the last time you've been in the presence of an illegal drug? (Do not include circumstances while serving in a sworn law enforcement / official capacity)

\_\_\_\_/\_\_\_\_/\_\_\_\_

## ALCOHOL USE:

*Please explain any 'yes' answers below. Be sure to reference your explanation with the corresponding question number.*

- |  |            |           |
|--|------------|-----------|
| 1. Have you ever missed work because of alcohol consumption?                     | <b>Yes</b> | <b>No</b> |
| 2. Been treated, counseled, or sought help for a drinking problem?               | <b>Yes</b> | <b>No</b> |
| 3. Has drinking ever caused a problem in your personal life or on the job?       | <b>Yes</b> | <b>No</b> |
| 4. Have you ever been told by someone that they felt you had a drinking problem? | <b>Yes</b> | <b>No</b> |
| 5. Have you ever purchased alcohol for a minor? If yes, how many times?_____     | <b>Yes</b> | <b>No</b> |
| 6. Have you ever been arrested for an alcohol related crime?                     | <b>Yes</b> | <b>No</b> |

What is your average consumption of alcohol during a typical week? \_\_\_\_\_

How many times have you been intoxicated in public in the last 2 years? \_\_\_\_\_

When was the last time? Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

How many times have you operated a vehicle while intoxicated in the past 2 years? \_\_\_\_\_

When was the last time? Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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## PRIOR LAW ENFORCEMENT SERVICE:

Fill out the below section ONLY if you have had SWORN, prior law enforcement service.

*Please circle the appropriate answer. Explain any 'yes' answers on the back of this page. Be sure to reference your explanation with the corresponding question number.*

While employed as a sworn law enforcement officer, did you ever engage in any of the following:

- |  |     |    |
|--|-----|----|
| 1. Take something that did not belong to you while on duty?  | Yes | No |
| 2. Keep anything you or anyone else removed from any:  | Yes | No |
| <input type="checkbox"/> Any building/residence <input type="checkbox"/> Prisoner <input type="checkbox"/> Crime scene |     |    |
| <input type="checkbox"/> Citizen <input type="checkbox"/> Accident scene <input type="checkbox"/> Evidence room        |     |    |
| <input type="checkbox"/> Vehicle(s) including patrol units   |     |    |
| 3. Drink alcohol while on duty?  | Yes | No |
| 4. Have sexual relations while on duty?  | Yes | No |
| 5. Sleep on duty?  | Yes | No |
| 6. Commit any felony or misdemeanor while on duty?   | Yes | No |
| 7. Hit or strike a handcuffed person?  | Yes | No |
| 8. Use excessive force?  | Yes | No |
| 9. Use a controlled or illegal substance while on duty?  | Yes | No |
| 10. Smuggle contraband or unauthorized material?   | Yes | No |
| 11. Accept anything in exchange for performing or not performing your duties?  | Yes | No |
| 12. Remove, copy, or read a file or document when not authorized to do so?   | Yes | No |
| 13. Make a false report or alter a document?   | Yes | No |
| 14. Plant evidence or otherwise "frame" someone?   | Yes | No |
| 15. Lie in court, on a report, or on an affidavit?   | Yes | No |
| 16. Use your official capacity to extort or attempt to extort anyone?  | Yes | No |
| 17. Destroy property / evidence / contraband without booking it?   | Yes | No |
| 18. Been terminated or asked to resign as peace officer?   | Yes | No |
| 19. Been given the option to resign in lieu of termination?  | Yes | No |
| 19. Received a written reprimand? If yes, how many times? _____  | Yes | No |
| 20. Received a suspension? If yes, how many times? _____   | Yes | No |
| 21. Been formally investigated for misconduct?   | Yes | No |
| 22. Received any other type of disciplinary action?  | Yes | No |
| 23. Lied to anyone during an internal investigation?   | Yes | No |
| 24. How many excessive use of force of complaints have you received? _____   |     |    |
| 25. How many citizen's complaints have you received? _____   |     |    |

Is there anything in your history that you know you're agency would want to know about, but has not been addressed in this questionnaire or anywhere else in the application process?

YES

NO

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

**All of the information I have revealed in this booklet is true, correct and complete. I have not intentionally withheld, falsified, or misrepresented any information in this booklet. By signing below, I give my word that I have been 100% truthful.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date